

06048311

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D; SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix Serial					
DATE RECEIVED					
	- 1 - 1				

hours per response 16.00

Convertible Promissory Notes, the Preferred Stock into which it is convertible and the underlyin Warrants to purchase Preferred Stock, the Preferred Stock issuable upon exercise and the Com	g Common Stock in connection therewith; mon Stock into which it can be converted
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	1276301
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) VizionWare, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 12708 Riata Vista Circle, Suite A115, Austin, TX, 78727	Telephone Number (Including Area Code) 512-493-9660
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) same	Telephone Number (Including Area Code)
Brief Description of Business	
Semiconductor Company	PAOCECCE
	lease specify):
business trust limited partnership, to be formed	GCT 1 9 2008
Actual or Estimated Date of Incorporation or Organization: Month Year	THOMSON FINANCIAL
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 77d(6).	Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is deemed filed with the U.S. Securities low or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 2054	9.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied.	

State:

not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

SEC 1972 (5-05)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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•	,	uer has been organized w to vote or dispose, or dire	• •	; 10% or more of	a class of equity securities of the issuer.
		corporate issuers and of corporate issuers and of corporate issuers.	corporate general and man	aging partners of	partnership issuers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Adler, John	individual)	. , ,· -			
Business or Residence Addre c/o InterWest, 2710 San					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, i Campion, Jay	f individual)				
Business or Residence Addre c/o Access Venture Part	•		· · · · ·	• ''	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Tompkins, Dan	f individual)				
Business or Residence Addre c/o Novus Ventures II, L				., 95014	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Watkins, Daniel	f individual)				
Business or Residence Addre c/o A3 Associates LP, 38					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, i Woodson, Larry	f individual)				
Business or Residence Addre c/o VisionWare, Inc., 12				·	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i Beck, Ted	f individual)				
Business or Residence Addre c/o VisionWare, Inc., 12	•		•		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Egan, Kenneth	f individual)				
Business or Residence Addre c/o VisionWare, Inc., 12'			•		

2.

Enter the information requested for the following:

	= =	=			a class of equity securities of the issuer.
		f corporate issuers and of of of partnership issuers.	corporate general and man	aging partners of	partnership issuers; and
		_ <u></u>			<u> </u>
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	findividual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Brehmer, Geoffrey E.	if individual)				
Business or Residence Addr c/o VisionWare, Inc., 12					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Jamison, Ben	if individual)				
Business or Residence Addr c/o VisionWare, Inc., 12	•	- · · · · · · · · · · · · · · · · · · ·			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Seale, Randy	if individual)				
Business or Residence Addr c/o VisionWare, Inc., 12	•	•	· · · · ·		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Timeline Venture Inves					
Business or Residence Addi 6540 Lusk Blvd., Suite	•	• •	· · · · · · · · · · · · · · · · · · ·		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, InterWest Partners VII	•	ited funds			
Business or Residence Addr 2710 Sand Hill Rd., Sec					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Novus Ventures II, L.P.			-		
Business or Residence Addi 20111 Stevens Creek Bl	,	• • • • • •	•	18	
		·			American LegalNet, Inc.

Enter the information requested for the following:

Each promoter of the issuer, if the issuer has been organized within the past five years;

Each executive offi	icer and director o		ect the vote or disposition of corporate general and man		a class of equity securities of the issuer. partnership issuers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, A3 Associates LP	if individual)				
Business or Residence Address 3801 Kirby Drive, Suite			· · · · ·		-
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Chaddock, Michael	if individual)				
Business or Residence Addre 2125 Hilton Head, Round I	•	Street, City, State, Zip Co	ode)	·	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, The University of Houston	if individual)		···	·	
Business or Residence Address 4800 Calhoun Road, House		Street, City, State, Zip Co	ode)	· · · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			•	
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)	_ .	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			· -	
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		****
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	<u> </u>			
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		· · ·		
Business or Residence Addre	ess (Number and S	Street, City, State, Zip Co	ode)		

2.

Enter the information requested for the following:

Each promoter of the issuer, if the issuer has been organized within the past five years;

I. Has th	ie issuer soli	d, or does th	ie issuer inte	end to sell, i	to non-accre	edited inves	tors this offe	ering?			ـــا -	
			Answer	also in App	endix, Colu	mn 2, if fili	ng under UI	LOE.				
2. What is the minimum investment that will be accepted from any individual?								\$ <u>N/</u> A				
								Yes	No			
4. Enter comm	the offering the informatission or sir	ntion reques	ted for each	h person w solicitation	ho has been of purchase	n or will be rs in connec	e paid or gi	iven, directl ales of secu	y or indirectities in the	ctly, any offering.	. 🛛	
	erson to be lites, list the r											
	er or dealer								P			
Full Name	(Last name	first, if indi-	vidual)									
Business o	r Residence	Address (N	umber and	Street, City,	State, Zip	Code)					46-10°-	
Name of A	ssociated B	roker or Dea	aler			<u>.</u>						
States in W	hich Person	Listed Has	Solicited o	r Intends to	Solicit Pure	chasers						
(Ch	eck "All Sta	ates" or chec	k individua	l States)							🗆 A	All States
AL	AK	AZ	AR	CA	CO	СТ	DE	DC	FL	GA	н	ID
<u> </u>						_	=	=	=	_		<u> </u>
IL	IN	IA	KS	KY	LA	МЕ	MD	MA	MI	MN	MS	мо
МТ	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
RI	SC	SD	TN	TX	UT	VΤ	VA	. WA	wv	WI	WY	PR
Full Name	(Last name	first, if indi	vidual)									
Business o	r Residence	Address (N	umber and :	Street, City,	State, Zip	Code)						
Name of A	ssociated B	roker or Dea	aler			4-						
States in W	hich Person	Listed Has	Solicited o	r Intends to	Solicit Pur	chasers						
(Ch	eck "All Sta	ates" or chec	k individua	l States)							🗆 /	All States
AL	AK	AZ	AR	CA	co	СТ	DE	DC	FL	GA	н	ID
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
_	=	=	=		550	=	=	=				
МТ	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ок	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
Full Name	(Last name	first, if indiv	vidual)									
Business o	r Residence	Address (N	umber and	Street, City,	State, Zip	Code)						
Name of A	ssociated B	roker or Dea	aler									
	hich Person				Solicit Purc	hasers						
	eck "All Sta				 ලෙබ		 [55]					All States
AL	AK	AZ	AR	CA	CO	СТ	DE	DC	FL	GA	ні	ID
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
MT	NE	NV	NH	NJ	NM	· NY	NC	ND	ОН	ОК	OR	PA
RI	SC	SD	TN	TX	ĪШ	VT	VA	WA	wv	wi	WV	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt\$	0	\$	0
	Equity\$			0
	Common Preferred		•	
	Convertible Securities (including warrants)	5,156,650.06*	\$	4,000,400.06
	Partnership Interests	0	\$	
	Other (Specify)\$. 0	\$	
	Total\$			
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors	11	\$_	4,000,400.06
	Non-accredited Investors	0	\$_	0
	Total (for filings under Rule 504 only)		\$_	
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		•	5.W.
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A			s
	Rule 504			s
	Total			\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		s	
	Printing and Engraving Costs			
	Legal Fees] s	25,000.00
	Accounting Fees	<u> </u>] \$	
	Engineering Fees] s	
	Sales Commissions (specify finders' fees separately)	<u> </u>		
	Other Expenses (identify)		\$	
	Total] s	25,000.00

*\$1,031,250.00 of this amount has not been received by the Issuer to date and will not be received until such time, if any, that the Warrants are exercised.

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	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$	5,131,650.06
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.			
		Payments to Officers,		
		Directors, &		Payments to
		Affiliates		Others
	Salaries and fees	S	□ \$.	-
	Purchase of real estate	S	□ \$.	
	Purchase, rental or leasing and installation of machinery	_		
	and equipment			
	Construction or leasing of plant buildings and facilities	□ \$	□ \$.	·
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ •	П "	
	Repayment of indebtedness		☐ °.	
	Working capital		_	
	Other (specify):		_	
			Ψ.	
		□ s	□ \$.	
	Column Totals	 \$	⊠ \$.	5,131,650.06
	Total Payments Listed (column totals added)	⋈ \$_	<u></u>	5,131,650.06
Г	D. FEDERAL SIGNATURE			
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of R	sion, upon writt	ule 505 en requ	, the following lest of its staff,
	cionWare, Inc.	Date September		5
	me of Signer (Print or Type) Title of Signer (Print or Type) President and Chief Executive Officer			
-				

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)